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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	=	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Jon First name C Middle name Miracle Last name and Suffix (Sr., Jr., II, III)	Traci First name L Middle name Miracle Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0585	xxx-xx-4956

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Debtor 1 Jon C Miracle Debtor 2 Traci L Miracle

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	☐ I have not used any business name or EINs. DBA JM 2 Trucking Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	232 Overbrook Drive	If Debtor 2 lives at a different address:
		Monroe, OH 45050 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Butler	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 2	Traci L Miracle					Case number (if known)	
Par	t 2:	Tell the Court About	our Bankrı	uptcy Case				
7.	Bank	chapter of the ruptcy Code you are sing to file under			cription of each, see <i>No</i> e top of page 1 and che		d by 11 U.S.C. § 342(b) for Individuals F priate box.	- -iling for Bankruptcy
	CHOO	sing to me under	■ Chapte	r 7				
			☐ Chapte	r 11				
			☐ Chapte	r 12				
			☐ Chapte	r 13				
8.	How	you will pay the fee	abou orde a pre	ut how you may p r. If your attorney e-printed address	pay. Typically, if you are y is submitting your pay: s.	paying the fe nent on your	check with the clerk's office in your loca ee yourself, you may pay with cash, cas behalf, your attorney may pay with a cr option, sign and attach the Application	hier's check, or money edit card or check with
			The ☐ I req but is appli	Filing Fee in Inst uest that my fee s not required to, les to your family	tallments (Official Form the be waived (You may waive your fee, and may size and you are unable	103A). request this c ay do so only e to pay the f	option only if you are filing for Chapter 7 if your income is less than 150% of the fee in installments). If you choose this o (Official Form 103B) and file it with your	. By law, a judge may, official poverty line that ption, you must fill out
9.		you filed for	■ No.					
		ruptcy within the 3 years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		ny bankruptcy s pending or being	■ No					
	filed not fi you,	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if know	n
				Debtor			Relationship to you	
				District		When	Case number, if know	'n
11.		ou rent your ence?	■ No.	Go to line 12.				
	.0314		☐ Yes.	Has your landle	ord obtained an eviction	judgment ag	gainst you?	
				☐ No. Go	to line 12.			
				_	II out <i>Initial Statement A</i> nkruptcy petition.	bout an Evic	tion Judgment Against You (Form 101A) and file it as part of

Jon C Miracle

Debtor 1

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	otor 2 Traci L Miracle		Case number (if known)
Par	Report About Any Bu	sinesses	You Own as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to Part 4.
		Yes.	Name and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Debtor is an independent operator in Name of business, if any
	If you have more than one		trucking/freight business
	sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code
	it to this petition.		Check the appropriate box to describe your business:
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
			Commodity Broker (as defined in 11 U.S.C. § 101(6))
			None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate is. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ins, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B).
	For a definition of small	■ No.	I am not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Don	Depart if You Own or	Have An	V Harrandavia Dramantiv as Amy Dramantiv That blends Immediate Attention
Par	Do you own or have any		y Hazardous Property or Any Property That Needs Immediate Attention
14.	property that poses or is	No.	
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?
			Number, Street, City, State & Zip Code

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Debtor 1	Jon C Miracle	
Debtor 2	Traci L Miracle	Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

	Incapa	city.
--	--------	-------

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 1:20-bk-10369 Doc 1 Filed 02/10/20 Entered 02/10/20 15:00:19 Desc Main Document Page 6 of 75

		lon C Miracle Traci L Miracle				Case num	nber (if known)	
Part	6: Ar	nswer These Questi	ons for Rep	orting Purposes				
		ind of debts do	16a. A				defined in 11 U.S.C. § 101(8) as "incurred by an	
			•	■ No. Go to line 16b.				
				☐ Yes. Go to line 17.				
				re your debts primarily busines noney for a business or investmen				
				No. Go to line 16c.				
				Yes. Go to line 17.				
			16c. S	tate the type of debts you owe that	at are not consur	ner debts or busir	ness debts	
17.	Are you	u filing under er 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.			
	after ar	estimate that ny exempt ty is excluded and	a res.	re paid that funds will be available			roperty is excluded and administrative expenses ors?	
	are pai	ministrative expenses e paid that funds will		No				
		ilable for ution to unsecured rs?] Yes				
18.		any Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000	
	you est	timate that you	50-99		□ 5001-10,000 □ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000	
			☐ 100-199 ☐ 200-999		ப 10,001-25,0	00	☐ More than 100,000	
19.		uch do you	□ \$0 - \$50	,000,	□ \$1,000,001 ·	- \$10 million	☐ \$500,000,001 - \$1 billion	
	estimat be wor	te your assets to th?	\$50,001		\$10,000,001		□ \$1,000,000,001 - \$10 billion	
				1 - \$500,000 1 - \$1 million	□ \$50,000,001 □ \$100,000,00	1 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
20.		uch do you	□ \$0 - \$50	,000	□ \$1,000,001 ·	- \$10 million	□ \$500,000,001 - \$1 billion	
	to be?	te your liabilities		- \$100,000	□ \$10,000,001 □ \$50,000,001		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
				1 - \$500,000 1 - \$1 million		1 - \$500 million	☐ More than \$50 billion	
Parí	7: Si	gn Below						
	you	9	I have exam	nined this petition, and I declare u	inder penalty of p	eriury that the inf	formation provided is true and correct.	
	•			•	. , ,	, ,	ble, under Chapter 7, 11,12, or 13 of title 11,	
							I choose to proceed under Chapter 7.	
				ey represents me and I did not pa have obtained and read the noti			not an attorney to help me fill out this	
			I request re	lief in accordance with the chapte	er of title 11, Unite	ed States Code, s	specified in this petition.	
							ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,	
			/s/ Jon C			/s/ Traci L Mir		
			Jon C Mir Signature o			Traci L Miracl Signature of Del		
			Executed or	February 5, 2020 MM / DD / YYYY			February 5, 2020 MM / DD / YYYY	

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	Document	Page / of /5	
Debtor 1 Jon C Miracle Debtor 2 Traci L Miracle		Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have ex	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.			ledge after an inquiry that the information in the
	/s/ Christine Boghosian Hill, Esq.	Date	February 5, 2020
	Signature of Attorney for Debtor		MM / DD / YYYY
	Christine Boghosian Hill, Esq. 004131	9	
	Printed name		
	Law Offices of Christine B Hill Ltd Firm name		
	3991 Hamiltonn Middletown Road		
	Suite T		
	Hamilton, OH 45011 Number, Street, City, State & ZIP Code		
	Contact phone 513 381-8999	Email address	chrishill atty@fuse net

0041319 OH Bar number & State Case 1:20-bk-10369 Doc 1 Filed 02/10/20 Entered 02/10/20 15:00:19 Desc Main Document Page 8 of 75

			<u> </u>	
Fill in this inform	mation to identify your	case:		
Debtor 1	Jon C Miracle			
	First Name	Middle Name	Last Name	
Debtor 2	Traci L Miracle			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number _				
(if known)				☐ Check if this is an amended filing
				•

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	124,996.22
	1c. Copy line 63, Total of all property on Schedule A/B	\$	124,996.22
Paı	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	288,133.10
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	24,407.43
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	100,205.66
	Your total liabilities	\$	412,746.19
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,964.13
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,201.19
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	ı personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debto	Traci L Miracle	Case number (if known)	
	From the Statement of Your Current Monthly Income: Co 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 I		\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Jon C Miracle

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	24,407.43
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	9,619.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	34,026.43

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		Document	Page 10 of 75		
Fill in this inf	ormation to identify your	case and this filing:			
Debtor 1	Jon C Miracle				
	First Name	Middle Name	Last Name		
Debtor 2	Traci L Miracle				
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT OF C	OHIO		
0 .					_
Case number					☐ Check if this is an amended filing
					amended ming
Official F	orm 106A/B				
Schedi	ule A/B: Prop	ertv			12/15
		pe items. List an asset only once.	If an asset fits in more than or	ne category list the asset in	
think it fits best	. Be as complete and accur	ate as possible. If two married pe	eople are filing together, both are	e equally responsible for su	pplying correct
nformation. If n Answer every q		a separate sheet to this form. O	n the top of any additional page	es, write your name and case	number (if known).
Part 1: Descri	be Each Residence, Buildin	g, Land, or Other Real Estate You	u Own or Have an Interest In		
1. Do you own	or have any legal or equitab	le interest in any residence, build	ling, land, or similar property?		
_					
No. Go to					
☐ Yes. Whe	re is the property?				
Part 2: Descri	be Your Vehicles				
		uitable interest in any vehicle de, also report it on Schedule G			hicles you own that
someone eise	unves. Ii you lease a venic	ie, also report it on <i>scriedule</i> e	5. Executory Contracts and Or	iexpired Leases.	
3. Cars, vans	trucks, tractors, sport u	tility vehicles, motorcycles			
□ No					
Yes					
	GMC			Do not deduct secured cla	aims or exemptions. Put
3.1 Make:	Sierra DuromaxPT		in the property? Check one	the amount of any secure	d claims on Schedule D:
Model:	2018	Li Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
Year:	Purchase	Debtor 2 only		O	O
Approxi		Debtor 1 and Debtor	or 2 only	Current value of the entire property?	Current value of the portion you own?
Other in	formation:	At least one of the	debtors and another		
				#45.000.00	445 000 00
		Check if this is co	mmunity property	\$45,663.00	\$45,663.00
		(See Instructions)			
	Chav			Do not deduct secured cla	aims or exemptions. Dut
3.2 Make:	Chev		in the property? Check one	the amount of any secure	d claims on Schedule D:
Model:	Silverado	Debtor 1 only		Creditors Who Have Clair	ns Secured by Property.
Year:	2016	Debtor 2 only Debtor 1 and Debtor		Current value of the entire property?	Current value of the
				entire property?	portion you own?
	formation:		debtors and another		
1	ED VEHICLE - Owner i I Leasing Corp.	S ☐ Check if this is co	mmunity property	\$0.00	\$0.00
	older is Security Natio		proporty		
Bank.	•				

Official Form 106A/B Schedule A/B: Property page 1

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Debto Debto		on C Miracle raci L Miracle	Ca	ase number (if known)		
3.3	Make: Jeep Model: Grand Cherokee Year: 2017		Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
		Approx	La Debiol 2 only	Current value of the	Current value of the	
	Approxin	nate mileage: 24,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?	
	Other inf	ormation:	☐ At least one of the debtors and another			
			☐ Check if this is community property (see instructions)	\$22,395.00	\$22,395.00	
3.4	Make: Model:	Jeep Wrangler	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D:</i>	
	Year:	2018	Debtor 2 only			
	Approxin	Approx anate mileage: 35,000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
	Other inf	ormation:	☐ At least one of the debtors and another			
	LEASED vehicle. Driven by son and paid for by son. Son does all maintenance and pays for insurance.		☐ Check if this is community property (see instructions)	\$0.00	\$0.00	
3.5	Make: Kaufman		Who has an interest in the property? Check one	the amount of any secured claims on Scr		
	Model:	Gooseneck Trailer TL	■ Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.	
	Year:	2020	Debtor 2 only	Current value of the	Current value of the	
	Approximate mileage: 0 Other information:		Debtor 1 and Debtor 2 only	entire property?	portion you own?	
			At least one of the debtors and another			
	Value i price.	s retail. Recent purchase	☐ Check if this is community property (see instructions)	\$9,000.00	\$9,000.00	
3.6	Make:	Kaufman	Who has an interest in the property? Check one	Do not deduct secured cla		
	Model:	TT	■ Debtor 1 only	Creditors Who Have Clair		
	Year:	2020	Debtor 2 only	Current value of the	Current value of the	
	Approxin	nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
	Other inf	ormation:	At least one of the debtors and another			
		s retail - previous se price	Check if this is community property (see instructions)	\$9,000.00	\$9,000.00	
3.7	Make: Peterbuilt		Who has an interest in the property? Check one	Do not deduct secured cla		
	Model:	379 Conventional 37	Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.	
	Year:	1997	Debtor 2 only	Current value of the	Current value of the	
		nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
1		ormation:	\square At least one of the debtors and another			
		able. Value only to extent could be sold for parts.	Check if this is community property (see instructions)	Unknown	Unknown	

Official Form 106A/B Schedule A/B: Property page 2

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	2 <u>T</u>	on C Miracle raci L Miracle	Ca	ase number (if known)		
	Make: Model:	Talbert Trailer	Who has an interest in the property? Check one ☐ Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:	
`	Year:	2000	Debtor 2 only	Current value of the	Current value of the	
,	Approxin	nate mileage:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?	
_ (Other inf	ormation:	☐ At least one of the debtors and another			
		ouble. Value is purchase	<u>_</u>	¢7 500 00	₾7 500 00	
F	price ii	n 2017.	☐ Check if this is community property (see instructions)	\$7,500.00	\$7,500.00	
3.9	Make:	Talbert	Who has an interest in the property? Check one	Do not deduct secured cl		
1	Model:	Trailer	Debtor 1 only	Creditors Who Have Clai	ms Secured by Property.	
,	Year:	2000	Debtor 2 only			
	Approxin	nate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
		ormation:	☐ At least one of the debtors and another		portion you own:	
		D Semi double. Value is	At least one of the deptors and another			
		ise price in 2017.	☐ Check if this is community property (see instructions)	\$7,500.00	\$7,500.00	
	Model: Year:	Side By Side 2016	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property?		
_(Other information:		☐ At least one of the debtors and another			
		is estimated - could be en \$12,000 - \$15,000	☐ Check if this is community property (see instructions)	\$12,000.00	\$12,000.00	
4.2 I	Make: Steal		Who has an interest in the property? Check one	Do not deduct secured cl		
- 1	Model:	Stealth Trailer TT	☐ Debtor 1 only	Creditors Who Have Clai		
,	Year:	2016	Debtor 2 only	Current value of the	Current value of the	
			■ Debtor 1 and Debtor 2 only	entire property?	portion you own?	
	Other information:		☐ At least one of the debtors and another			
	Other inf			Unknown	Unknown	

Yes. Describe.....

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Debtor 1 Debtor 2	Jon C Mirac		f known)
		Miscellaneous items of household goods and furnishings - See attached Schedule	\$0.00
■ No	ples: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; phones, cameras, media players, games	music collections; electronic devices
8. Collect	tibles of value ples: Antiques and	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; star ons, memorabilia, collectibles	np, coin, or baseball card collections;
Exam _i ■ No	ment for sports and poles: Sports, photo musical instru	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
■ No		s, shotguns, ammunition, and related equipment	
□ No		othes, furs, leather coats, designer wear, shoes, accessories	
		Wearing apparel	\$600.00
□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, Wedding bands	gems, gold, silver \$2,000.00
<i>Exan</i> ■ No	farm animals nples: Dogs, cats,		
■ No	other personal and some second control of the specific info	d household items you did not already list, including any health aids you did no	ot list
		of all of your entries from Part 3, including any entries for pages you have attac number here	\$2,600.00
	escribe Your Finan		
Do you o	own or have any l	egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured

claims or exemptions.

Case 1:20-bk-10369 Doc 1 Filed 02/10/20 Entered 02/10/20 15:00:19 Page 14 of 75 Document Debtor 1 Jon C Miracle Traci L Miracle Debtor 2 Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ Yes..... Cash \$150.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **PNC Bank** Checking - \$500 **WPCU** Savings - \$5 **TelOhio** Checking - \$1,414.43 17.1. \$2,312.38 Savings - \$1,001.13 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401k - \$3.041 \$3.041.00 **IRA** \$3.834.84 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No
□ Yes...... Issuer name and description.

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	ebtor 1 ebtor 2	Jon C Miracle Traci L Miracle	Doddin	3	Case number (if known)	
24	26 U.S.C	s in an education IF C. §§ 530(b)(1), 529/	RA, in an account in a qualified A(b), and 529(b)(1).	ABLE program, or under a qu	alified state tuition progra	m.
	■ No □ Yes	Institu	tion name and description. Separ	ately file the records of any inter	ests.11 U.S.C. § 521(c):	
25	■ No	equitable or future Give specific informa	interests in property (other that	n anything listed in line 1), an	d rights or powers exercis	sable for your benefit
26	Patents Examp ■ No	s, copyrights, trade	marks, trade secrets, and other names, websites, proceeds from		nts	
27	License Examp ■ No	es, franchises, and	other general intangibles , exclusive licenses, cooperative a	association holdings, liquor licen	ises, professional licenses	
M	oney or p	property owed to yo	ou?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	■ No	unds owed to you	ation about them, including whethe	er you already filed the returns a	nd the tax years	
29	■ No		p sum alimony, spousal support, o	child support, maintenance, divo	rce settlement, property set	tlement
30	Examp No	benefits; unpaid	disability insurance payments, dis I loans you made to someone else		n pay, workers' compensat	ion, Social Security
21		Give specific informations in insurance polices in				
51			v, or life insurance; health savings	account (HSA); credit, homeow	ner's, or renter's insurance	
	Yes.	Name the insurance	company of each policy and list it Company name:	ts value. Beneficia	агу:	Surrender or refund value:
			2 Select Term policies on debtors. State Farm Life Insurance LF-3619-7687 LF-3619-7923 Children are beneficiaries 2 20-pay Life Policies on Cowned by joint debtor LF-3757-5753 LF-3757-6680 Beneficiaries are parents	Co		
			Spouses are co-beneficiar	ies.		\$0.00

Official Form 106A/B Schedule A/B: Property page 6

Case 1:20-bk-10369 Doc 1 Filed 02/10/20 Entered 02/10/20 15:00:19 Desc Main Page 16 of 75 Document Debtor 1 Jon C Miracle Debtor 2 Traci L Miracle Case number (if known) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$9,338.22 for Part 4. Write that number here...... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Jon C Miracle Debtor 1 Debtor 2 Traci L Miracle Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$113,058.00 Part 3: Total personal and household items, line 15 \$2,600.00 57. 58. Part 4: Total financial assets, line 36 \$9,338.22 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$124,996.22 Copy personal property total \$124,996.22 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$124,996.22

Official Form 106A/B Schedule A/B: Property page 8

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Fill in this information to identify your case:								
Debtor 1	Jon C Miracle							
	First Name	Middle Name	Last Name					
Debtor 2	Traci L Miracle							
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO					
Case number					☐ Check if this is an			
					amended filing			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

 Which set of exemptions are you claiming? Check one only, even if your spouse is 	is tiling	with you
--	-----------	----------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Miscellaneous items of household goods and furnishings - See attached	\$0.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Schedule Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(1)(0)
Wedding bands Line from Schedule A/B: 12.1	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Line noin ochedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(1)(0)
Cash Line from Schedule A/B: 16.1	\$150.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
			100% of fair market value, up to any applicable statutory limit	
PNC Bank Checking - \$500	\$2,312.38		100%	Ohio Rev. Code Ann. § 2329.66(A)(18)
WPCU Savings - \$5			100% of fair market value, up to any applicable statutory limit	. ,. ,
TelOhio Checking - \$1,414.43 Savings - \$1,001.13 Line from Schedule A/B: 17.1				

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Dulef description of the control of the	Ourmant and a state		ount of the exemption you claim	On said a laws that all a said
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
PNC Bank Checking - \$500	\$2,312.38		\$900.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
-			100% of fair market value, up to	(// /
WPCU Savings - \$5			any applicable statutory limit	
TelOhio Checking - \$1,414.43 Savings - \$1,001.13 Line from <i>Schedule A/B</i> : 17.1				
401k - \$3,041	\$3,041.00		100%	Ohio Rev. Code Ann. §
Line from <i>Schedule A/B</i> : 21.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(10)(b)
IRA Line from Schedule A/B: 21.2	\$3,834.84		100%	Ohio Rev. Code Ann. § 2329.66(A)(10)(c)
Line from Scneaule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	2529.00(A)(10)(C)
2 Select Term policies on lives of debtors.	\$0.00		100%	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(c), 3917.05
State Farm Life Insurance Co LF-3619-7687 LF-3619-7923 Children are beneficiaries			100% of fair market value, up to any applicable statutory limit	2020:00(: 1)(0)(0); 00:11:00
2 20-pay Life Policies on Children owned by joint debtor LF-3757-5753 LF-3757-6680 Beneficiaries are parents				
Spo Line from <i>Schedule A/B</i> : 31.1				
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)
☐ Yes. Did you acquire the property covered☐ No	ed by the exemption wi	ithin 1	,215 days before you filed this case	?

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			Document F	Page 20	of 75		
Fill	in this informa	tion to identify you	r case:				
Deb	tor 1	Jon C Miracle					
		First Name	Middle Name	Last Name			
Deb	tor 2	Traci L Miracle					
(Spot	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Bank	cruptcy Court for the:	SOUTHERN DISTRICT OF OHIO)			
Cas (if kno	e number					_	if this is an led filing
	icial Form hedule D		Who Have Claims S	ecure	d by Propert	y	12/15
is ne			f two married people are filing together, out, number the entries, and attach it to				
1. Do	any creditors ha	ave claims secured by	your property?				
	_		nis form to the court with your other so	chedules. Yo	ou have nothing else to	o report on this form.	
	Yes Fill in a	Ill of the information b	nelow		· ·	•	
		Secured Claims	Solow.				
					Column A	Column B	Column C
for e	ach claim. If mor	e than one creditor has	nore than one secured claim, list the credit a particular claim, list the other creditors in cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Advantage	Leasing Corp	Describe the property that secures the	e claim:	\$32,225.00	Unknown	Unknown
	Creditor's Name	op's Lane	1997 Peterbuilt 379 Convention Inoperable. Value only to extest could be sold for parts. This includes obligations on (2) Tatrailers. As of the date you file, the claim is: Chemical Convention on the convention of the conventio	ent that debt albert			
	#280 Brookfield,	WI 53005	apply. Contingent	icon all triat			
	Number, Street, C	ity, State & Zip Code	☐ Unliquidated				
			Disputed				
_	owes the debt	t? Check one.	Nature of lien. Check all that apply.				
	Debtor 1 only Debtor 2 only		☐ An agreement you made (such as mo car loan)	ortgage or sec	ured		
	Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
	at least one of the	debtors and another	☐ Judgment lien from a lawsuit				
	Check if this claim	m relates to a	Other (including a right to offset)	lon-Purch	ase Money Securit	у	

community debt

Date debt was incurred

Last 4 digits of account number

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Debtor 1 Jon C Miracle		Case number (if known)		
First Name Middle N	ame Last Name	-		
Debtor 2 Traci L Miracle				
First Name Middle N	ame Last Name			
2.2 Advantage Leasing Corp	Describe the property that secures the claim:	Unknown	\$7,500.00	Unknown
Creditor's Name	2000 Talbert Trailer			
	Semi double. Value is purchase			
	price in 2017. Crosss collateralized			
13400 Bishop's Lane,	with Peterbuilt.			
#280	As of the date you file, the claim is: Check all that apply.			
Brookfield, WI 54005	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	■ Other (including a right to offset) Lease			
Date debt was incurred	Last 4 digits of account number			
2.3 Advantage Leasing Corp	Describe the property that secures the claim:	Unknown	\$7,500.00	Unknown
Creditor's Name	2000 Talbert Trailer		Ψ. ,σσσ.σσ	
	Semi double. Value is purchase			
	price in 2017. Cross collateralized			
13400 Bishop's Lane,	with Peterbuilt.			
#280	As of the date you file, the claim is: Check all that			
Brookfield, WI 54005	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Number, Street, City, State & Zip Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
_				
Debtor 1 only	_	acured		
Debtor 1 only	An agreement you made (such as mortgage or secar loan)	ecured		
Debtor 2 only	☐ An agreement you made (such as mortgage or se	ecured		
	 ☐ An agreement you made (such as mortgage or se car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) 	ecured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a	An agreement you made (such as mortgage or secar loan)	ecured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	 □ An agreement you made (such as mortgage or secar loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit 	ecured		

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	or 1 Jon C Miracle	C	Case number (if known)		
	First Name Middle N	ame Last Name			
Debto		Lost Name			
	First Name Middle N	lame Last Name			
24	Auto Now Acceptance			•	
2.4	Co.	Describe the property that secures the claim:	\$8,892.20	\$9,000.00	\$0.00
(Creditor's Name	2020 Kaufman Gooseneck Trailer TL			
		0 miles			
		Value is retail. Recent purchase price.			
	4746 Old Scioto Trail	As of the date you file, the claim is: Check all that			
	Portsmouth, OH 45662	apply.			
_	Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
	Number, Street, Oity, State & Zip Code	☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ De	btor 1 only	☐ An agreement you made (such as mortgage or sec	ured		
☐ De	btor 2 only	car loan)			
■ De	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At i	least one of the debtors and another	☐ Judgment lien from a lawsuit			
	eck if this claim relates to a	Other (including a right to offset) Lease			
co	ommunity debt				
Date d	debt was incurred	Last 4 digits of account number			
	A(- N A (
ノカ	Auto Now Acceptance	Describe the property that secures the claim:	\$7,978.90	\$9,000.00	\$0.00
2.5	Auto Now Acceptance Co. Creditor's Name	Describe the property that secures the claim:	\$7,978.90	\$9,000.00	\$0.00
2.5	Co.	Describe the property that secures the claim: 2020 Kaufman TT 0 miles Value is retail - previous purchase	\$7,978.90	\$9,000.00	\$0.00
2.5	Co.	2020 Kaufman TT 0 miles Value is retail - previous purchase price	\$7,978.90	\$9,000.00	\$0.00
[2.5]	Co.	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that	\$7,978.90	\$9,000.00	\$0.00
2.5	Creditor's Name	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply.	\$7,978.90	\$9,000.00	\$0.00
2.5	Creditor's Name 4746 Old Scioto Trail	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply. Contingent	\$7,978.90	\$9,000.00	\$0.00
2.5	Co. Creditor's Name 4746 Old Scioto Trail Portsmouth, OH 45662	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply.	\$7,978.90	\$9,000.00	\$0.00
2.5	Co. Creditor's Name 4746 Old Scioto Trail Portsmouth, OH 45662	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$7,978.90	\$9,000.00	\$0.00
2.5	Creditor's Name 4746 Old Scioto Trail Portsmouth, OH 45662 Number, Street, City, State & Zip Code owes the debt? Check one.	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec		\$9,000.00	\$0.00
Z.5	Co. Creditor's Name 4746 Old Scioto Trail Portsmouth, OH 45662 Number, Street, City, State & Zip Code owes the debt? Check one. btor 1 only btor 2 only	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan)		\$9,000.00	\$0.00
2.5 (Co. Creditor's Name 4746 Old Scioto Trail Portsmouth, OH 45662 Number, Street, City, State & Zip Code owes the debt? Check one. bbtor 1 only btor 2 only bbtor 1 and Debtor 2 only	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien)		\$9,000.00	\$0.00
Z.5 (Creditor's Name 4746 Old Scioto Trail Portsmouth, OH 45662 Number, Street, City, State & Zip Code owes the debt? Check one. bbtor 1 only bbtor 2 only lebtor 1 and Debtor 2 only least one of the debtors and another	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or sec car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit		\$9,000.00	\$0.00
Who c □ Del □ Del □ At I □ Ch	Co. Creditor's Name 4746 Old Scioto Trail Portsmouth, OH 45662 Number, Street, City, State & Zip Code owes the debt? Check one. bbtor 1 only btor 2 only bbtor 1 and Debtor 2 only	2020 Kaufman TT 0 miles Value is retail - previous purchase price As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sec car loan) Statutory lien (such as tax lien, mechanic's lien)		\$9,000.00	\$0.00

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Debtor 1 Jon C Miracle		Case number (if known)		
First Name Middle Na	ame Last Name			
Debtor 2 Traci L Miracle				
First Name Middle Na	ame Last Name			
2.6 Burhill Leasing	Describe the property that secures the claim:	\$52,055.00	\$0.00	\$52,055.00
Creditor's Name	2016 Chev Silverado 68,678+ miles LEASED VEHICLE - Owner is Burhill Leasing Corp. Lienholder is Security National Bank.			
116 N Jefferson Street Dayton, OH 45402	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or scar loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Lease			
Date debt was incurred 11/9/19	Last 4 digits of account number			
2.7 Freedom Road Financial	Describe the property that secures the claim:	\$13,929.00	\$12,000.00	\$1,929.00
Creditor's Name	2016 RZR Turbo - 2 seat Side By			
	Side			
	Value is estimated - could be			
Attn: Bankruptcy	between \$12,000 - \$15,000 As of the date you file, the claim is: Check all that			
Po Box 4597	apply.			
Oak Brook, IL 60522	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Purchase	Money Security		
Opened 05/18 Last Active 10/25/19	Last 4 digits of account number 2759)		

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Debtor 1 Jon C Mira	acle		Case	number (if known)		
First Name	Middle N	ame Last Name	<u> </u>	_		
Debtor 2 Traci L Min	racle Middle N	ame Last Name	_			
Filst Name	ivildale in	ame Last Name				
2.8 General Electr	ic CU	Describe the property that secures	the claim:	\$8,001.00	\$514.00	\$7,487.00
Creditor's Name		Debt consolidation of 1993 Grand Cherokee	Jeep			
Attn: Bankrupt 10485 Reading Cincinnati, OH	Road	As of the date you file, the claim is: apply. Contingent	Check all that			
Number, Street, City, S	tate & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only☐ Debtor 2 only		An agreement you made (such as car loan)	mortgage or secured	l		
■ Debtor 2 only ■ Debtor 1 and Debtor 2		☐ Statutory lien (such as tax lien, me	echanic's lien)			
■ Debtor 1 and Debtor 2 ■ At least one of the deb	,	☐ Judgment lien from a lawsuit	scriatile 3 liett)			
☐ Check if this claim re		Other (including a right to offset)	Non-Purchase	Money Security		
Date debt was incurred 2.9 Santander Cor		<u> </u>		#45.050.00	\$0.00	\$45.050.00
USA		Describe the property that secures		\$15,060.00	\$0.00	\$15,060.00
Creditor's Name Attn: Bankrupt 10-64-38-Fd7 (•	2018 Jeep Wrangler Approximiles LEASED vehicle. Driven by paid for by son. Son does a maintenance and pays for insurance. As of the date you file, the claim is:	son and			
St		apply.	: Check all that			
Reading, PA 1		Contingent				
Number, Street, City, S	tate & Zip Code	Unliquidated				
Who owes the debt? C	heck one.	Disputed Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as car loan)	mortgage or secured	I		
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the deb		☐ Judgment lien from a lawsuit				
☐ Check if this claim re community debt	lates to a	Other (including a right to offset)	Lease			
Date debt was incurred	Opened 07/18 Last Active	Last 4 digits of account num	nher 1000			

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Debto	or 1 Jon C Mirac	le			Case number (if known)		
Date	First Name	Middle Na	ame Last Name	_			
Debto	or 2 Traci L Mira	CIE Middle Na	ame Last Name	_			
2.1	Wright Patt Cred	lit Union	Describe the property that secures	the claim:	\$48,585.00	\$22,395.00	\$26,190.00
	Creditor's Name		2017 Jeep Grand Cherokee				
			24,000 miles				
	Attn: Bankruptc	•	As of the date you file, the claim is:	Check all that			
	3560 Pentagon E Beavercreek, Oh		apply.				
_	Number, Street, City, State		☐ Contingent☐ Unliquidated				
	Number, Street, City, State	e & Zip Code	☐ Disputed				
Who	owes the debt? Che	ck one.	Nature of lien. Check all that apply.				
	btor 1 only btor 2 only		☐ An agreement you made (such as car loan)	mortgage or s	secured		
_	btor 1 and Debtor 2 or	nly	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At	least one of the debtor	s and another	☐ Judgment lien from a lawsuit				
	eck if this claim relat ommunity debt	tes to a	Other (including a right to offset)	Non-Puro	chase Money Security	- Refinance	
	C	Opened 08/12/19 _ast Active					
Date o		1/19	Last 4 digits of account num	ober 0004	<u> </u>		
2.1							
1	Wright Patt Cred	lit Union	Describe the property that secures	the claim:	\$64,512.00	\$45,663.00	\$18,849.00
_	Creditor's Name		2018 GMC Sierra DuromaxF Purchased at 15,457 miles	PT			
	Attn: Bankruptc: 3560 Pentagon E	Blvd.	As of the date you file, the claim is: apply.	Check all that			
_	Beavercreek, OF	1 45431	☐ Contingent				
	Number, Street, City, State	e & Zip Code	Unliquidated				
Who	owes the debt? Che	ck one.	☐ Disputed Nature of lien. Check all that apply.				
_	btor 1 only btor 2 only		☐ An agreement you made (such as car loan)	mortgage or s	secured		
_	btor 1 and Debtor 2 or	nlv	☐ Statutory lien (such as tax lien, me	chanic's lien)			
	least one of the debtor	•	☐ Judgment lien from a lawsuit				
	eck if this claim relat	tes to a	Other (including a right to offset)	Non-Puro	chase Money Security	- Refinance	
		Opened 08/12 Last					
Date o	_	Active 11/19	Last 4 digits of account num	ber 0002	2		

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Debto	or 1	Jon C Mira	icle		Case	e number (if known)		
		First Name	Middle Na	ame Last Name				
Debto	or 2	Traci L Min		Last Name				
		First Name	Middle Na	ame Last Name				
2.1	Wri	ght Patt Cro	edit Union	Describe the property that secures the	e claim:	\$36,895.00	Unknown	Unknown
	Credit	or's Name		2016 Steal Stealth Trailer TT				
_	356 Bea	n: Bankrupt 0 Pentagon vercreek, 0	Blvd. DH 45431	Purchased for \$33,757 in June Current value unknown. As of the date you file, the claim is: Chapply. Contingent				
	Numb	er, Street, City, S	tate & Zip Code	☐ Unliquidated☐ Disputed				
Who	owes	the debt? C	neck one.	Nature of lien. Check all that apply.				
□ De		•		☐ An agreement you made (such as mo car loan)	ortgage or secured	i		
_		and Debtor 2	only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
			tors and another	☐ Judgment lien from a lawsuit				
		f this claim re unity debt	lates to a		Ion-Purchase	Money Security -	Refinance	
Date o	debt v	was incurred	Opened 06/19 Last Active 11/19	Last 4 digits of account numbe	r <u>0001</u>			
If thi Write	is is is is e thate 2: L	the last page of t number here List Others to age only if you	of your form, add to Be Notified for have others to be	olumn A on this page. Write that numbe the dollar value totals from all pages. r a Debt That You Already Listed e notified about your bankruptcy for a c we to someone else, list the creditor in	lebt that you alre		example, if a collection	
than o	ne c	reditor for any		you listed in Part 1, list the additional of				
	Chi PO	ne, Number, Sti rysler Capi Box 66064 llas, TX 752	7	Zip Code		ne in Part 1 did you enter	the creditor? 2.9	
	Fre 106	ne, Number, Streedom Road 605 Double no, NV 8952	R Blvd	Zip Code		ne in Part 1 did you enter	the creditor? 2.7	
	Ge	ne, Number, Sti neral Electi 185 Reading		Zip Code		ne in Part 1 did you enter	the creditor? _2.8_	
		cinnati, OF			_act i digito			
	Sar		reet, City, State & Z nsumer USA	Zip Code		ne in Part 1 did you enter	the creditor? 2.9	
		rt Worth, T			Last 4 digits	of account number		
	Nam Wri		reet, City, State & Z redit Union n Blvd	Zip Code		ne in Part 1 did you enter	the creditor? 2.10	

Official Form 106D

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Debto	r 1 Jon C Miracl	е		Case number (if known)
	First Name	Middle Name	Last Name	
Debto	r 2 Traci L Mirac	ele		
	First Name	Middle Name	Last Name	-
	Name, Number, Street Wright Patt Cred PO Box 886 Wilmington, OH			On which line in Part 1 did you enter the creditor?
	Name, Number, Street Wright Patt Crec 3560 Pentagon E Beavercreek, Oh	Blvd		On which line in Part 1 did you enter the creditor?
	Name, Number, Street Wright Patt Crec 3560 Pentagon E Beavercreek, Oh	Blvd		On which line in Part 1 did you enter the creditor?

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			L	Jocument	raye	20 UI 1	5			
Fill i	n this inforn	nation to identify your	ase:							
Debt	tor 1	Jon C Miracle								
		First Name	Middle Na	ame	Last Name)				
Debt		Traci L Miracle								
(Spou	se if, filing)	First Name	Middle Na	ame	Last Name	•				
Unite	ed States Bar	nkruptcy Court for the:	SOUTHERN	DISTRICT OF O	HIO					
Case	e number									
(if kno				_				_ c	heck if this i	is an
								a	mended filin	ıg
Offi.	cial Form	n 106E/F								
		/F: Creditors W	ho Havo	Unsecured	l Claim	2			12	2/15
		l accurate as possible. Us					r creditors with NO	IPRIORITY clair		
Sched Sched left. A name	dule G: Execut dule D: Credito ttach the Con and case nun	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Secutinuation Page to this pag nber (if known).	red Leases (Of ured by Proper e. If you have r	ficial Form 106G). by. If more space is no information to re	Do not inclu needed, co	de any cre py the Part	ditors with partially you need, fill it out,	secured claims number the ent	that are liste tries in the bo	ed in oxes on the
Part 1. [I of Your PRIORITY Un								
_	No. Go to P		i ciaiilis agailis	st you r						
	Yes.	art Z.								
2. L	ist all of your dentify what typossible, list the	priority unsecured claims be of claim it is. If a claim ha e claims in alphabetical orde than one creditor holds a pa	s both priority and a coording to the coordinate to th	nd nonpriority amour ne creditor's name. I	nts, list that of you have m	laim here a	nd show both priority	and nonpriority a	mounts. As m	nuch as
(For an explana	ation of each type of claim, s	ee the instructio	ns for this form in th	e instruction	booklet.)	Total claim	Priority amount	Nonpi amou	riority
2.1		Revenue Service	La	st 4 digits of accou	unt number		\$24,407.43	\$24,40	7.00	\$0.43
	Insolver 1240 Ea	editor's Name ncy Goup 6 st Ninth Street, Roo nd, OH 44199		hen was the debt in	ncurred?	2018		-		
		reet City State Zip Code	As	of the date you file	e, the claim	is: Check a	II that apply			
	Who incurred	the debt? Check one.		Contingent						
	Debtor 1 o	•		Unliquidated						
	Debtor 2 o	nly		Disputed						
	Debtor 1 a	nd Debtor 2 only	Ту	pe of PRIORITY un	secured cla	im:				
	☐ At least on	e of the debtors and anothe	r 🗆	Domestic support of	obligations					
	☐ Check if the	his claim is for a commun	ity debt	Taxes and certain	other debts y	ou owe the	government			
	Is the claim s	subject to offset?		Claims for death or	r personal inj	ury while yo	u were intoxicated			
	■ No			Other. Specify						
	☐ Yes			In	ncome tax	es				
Part	2: List Al	l of Your NONPRIORIT	Y Unsecured	Claims						
3. E	Oo any credito	rs have nonpriority unsec	ured claims ag	ainst you?						
	☐ No. You hav	ve nothing to report in this pa	art. Submit this f	orm to the court with	n your other s	chedules.				
ı	Yes.									
u	insecured clain	nonpriority unsecured cla n, list the creditor separately or holds a particular claim, li	for each claim.	For each claim liste	d, identify wh	at type of c	laim it is. Do not list cl	aims already inc	luded in Part	1. If more

Total claim

Part 2.

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	r 1 Jon C Miracle r 2 Traci L Miracle		Case number (if known)	
				40.500.00
4.1	Acima Credit Nonpriority Creditor's Name 9815 Monroe Street 4th Floor	Last 4 digits of account number When was the debt incurred?	2029 Opened 11/19 Last Active 11/29/19	\$3,509.00
	Sandy, UT 84070 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	■ Other. Specify GMC Duror indicated le	nax maintenance (Credit report ease)	
4.2	Acima Credit Nonpriority Creditor's Name	Last 4 digits of account number	2264	\$3,699.00
	9815 Monroe Street 4th Floor Sandy, UT 84070	When was the debt incurred?	Opened 11/19 Last Active 11/29/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
	■ No		omax maintenance (Credit report	
	Yes	Other. Specify indicated le	ease)	
4.3	Advantage Nonpriority Creditor's Name	Last 4 digits of account number	8657	\$1,537.90
	Dept 59475 Milwaukee, WI 53259-0475	When was the debt incurred?	Prior to 6/25/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane and other similar delete	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Loan		

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Debto	Traci L Miracle		Case number (if known)	
4.4	Capital One	Last 4 digits of account number	4986	\$1,746.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 11/11 Last Active 12/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.5	Capital One/walmart	Last 4 digits of account number	8242	\$446.00
	Nonpriority Creditor's Name PO Box 4069 Carol Stream, IL 60197-4069	When was the debt incurred?	Opened 04/17 Last Active 11/08/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.6	Cbna	Last 4 digits of account number	8160	\$4,689.00
	Nonpriority Creditor's Name Attn: Centralized Bankruptcy Po Box 790034 St Louis. MO 63179	When was the debt incurred?	Opened 09/16 Last Active 11/19	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	l (Sears)	

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	Traci L Miracle		Case number (if known)	
4.7	Citibank/Best Buy	Last 4 digits of account number	2642	\$5,286.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 790441	When was the debt incurred?	Opened 11/14 Last Active 12/19	
	St. Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.8	Credit First National Association Nonpriority Creditor's Name	Last 4 digits of account number	3326	Unknown
	Attn: Bankruptcy Po Box 81315	When was the debt incurred?	Opened 08/18 Last Active 12/19	
	Cleveland, OH 44181 Number Street City State Zip Code	As of the date you file, the claim i	s. Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	э. Спеск ан шасарру	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	_	<u> </u>		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	☐ Student loans	- Old	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify Charge Acc	count	
4.9	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	3087	\$1,100.00
	Attn: Bankruptcy Department Po Box 15316	When was the debt incurred?	Opened 05/17 Last Active 12/19	
	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim i	S. Chaele all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан that аррну	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	

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		0055	*
Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	2055	\$12,502.00
Attn: Bankruptcy Department Po Box 15316	When was the debt incurred?	Opened 01/17 Last Active 11/20/19	
Wilmington, DE 19850			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
☐Yes	■ Other. Specify Credit Card	1	
Ors Cassinelli & Shanker			\$5,160.00
Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?		\$ 5,160.00
'242 Tylers Corner Drive Suite A Vest Chester, OH 45069	when was the dept incurred?		
lumber Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐Yes	Other. Specify Orthodontic	a sevices	
Ors Cassinelli & Shanker	Last 4 digits of account number		\$3,735.00
Nonpriority Creditor's Name 7242 Tylers Corner Drive Suite A	When was the debt incurred?		
West Chester, OH 45069 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	Student loans		
☐ Check if this claim is for a community debt s the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other. Specify Orthodonti		

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Emergency Medicine Specialists	Last 4 digits of account number	7324	\$771.0
Nonpriority Creditor's Name PO Box 145406 Cincinnati, OH 45250-5406	When was the debt incurred?	9/16/19	
Number Street City State Zip Code Nho incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Medical ser	rvices	
Erie Twp (Erie PD)	Last 4 digits of account number	2865	\$307.45
Nonpriority Creditor's Name		0/4/40	
PO Box 504 Greensburg, IN 47240	When was the debt incurred?	8/1/19	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	tration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	■ Other. Specify Police squad car response to MV accident		
First National Bank	Last 4 digits of account number	2737	\$14,267.00
Nonpriority Creditor's Name Attn: Bankruptcy 1620 Dodge St Mailstop 4440 Omaha, NE 68197	When was the debt incurred?	Opened 07/16 Last Active 12/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing plans, and other similar debts		
☐Yes	Cradit Card	l (Speedway - Fuel for truck)	

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	or 2 Traci L Miracle		Case number (if known)	
4.1 6	First National Bank	Last 4 digits of account number	8474	\$6,186.00
,	Nonpriority Creditor's Name Attn: Bankruptcy 1620 Dodge St Mailstop 4440 Omaha, NE 68197	When was the debt incurred?	Opened 07/18 Last Active 11/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	i (Jeep)	
4.1 7	G.e. Federal Credit Nonpriority Creditor's Name	Last 4 digits of account number	2762	\$4,341.00
	10485 Reading Rd Cincinnati, OH 45241	When was the debt incurred?	Opened 11/16 Last Active 12/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	o plans, and other similar debts	
	Yes	Other Specify Credit Card		
4.1 8	JP Graham Transport Inc Nonpriority Creditor's Name	Last 4 digits of account number		\$400.00
	420 Constitution Blvd New Brighton, PA 15066	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Account		

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Debto Debto	or 1 Jon C Miracle or 2 Traci L Miracle	Case number (if known)		
4.1 9	Kettering Health Network	Last 4 digits of account number	4296	\$1,888.06
	Nonpriority Creditor's Name PO Box 933310 Cleveland, OH 44193	When was the debt incurred?	9/16/19 and 12/30/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical ser	vices	
4.2 0	Kohls/Capital One	Last 4 digits of account number	4593	\$599.00
	Nonpriority Creditor's Name Attn: Credit Administrator Po Box 3043	When was the debt incurred?	Opened 08/18 Last Active 12/19	
	Milwaukee, WI 53201 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	·		
	<u> </u>	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Charge Acc	count	
4.2	Memorial Hospital	Last 4 digits of account number	6257	\$719.87
	Nonpriority Creditor's Name PO Box 931316 Cleveland, OH 44193-1316	When was the debt incurred?	12/14/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	_	-		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	Student loans	a Cianni.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Medical ser	• •	
	□ res	Other. Specify	VICE3	

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Monroe Urgent Care	Last 4 digits of account number	6166	\$85.00
Nonpriority Creditor's Name 262 North Main Street Monroe, OH 45050-1236	When was the debt incurred?	11/23/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical ser	vices	
Navient	Last 4 digits of account number	0413	\$9,619.00
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 04/07 Last Active	
Po Box 9640	When was the debt incurred?	11/19	
Wilkes-Barre, PA 18773	_		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent		
_			
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
At least one of the debtors and another	Student loans		
☐ Check if this claim is for a community debt	_		
Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify		
_ 103	Educationa	l .	
Republic Bank & Trust Co	Last 4 digits of account number	8080	\$2,637.30
Nonpriority Creditor's Name PO Box 6877 Carol Stream, IL 60197-6877	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset? ■	report as priority claims		
No	☐ Debts to pension or profit-sharin	• •	
☐ Yes	Other. Specify Account - E	Business debt	

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Republic Bank & Truste Co	Last 4 digits of account number	2980	\$1,885.24
Nonpriority Creditor's Name PO Box 6877 Carol Stream, IL 60197-6877	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Account - E	• •	
Syncb/furniture Fair	Last 4 digits of account number	2144	Unknowr
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 11/13 Last Active	
Orlando, FL 32896			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Syncb/hhgreg	Last 4 digits of account number	9020	\$1,017.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 08/17 Last Active 11/19	
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	• •	
☐ Yes	■ Other. Specify Charge Acc	count	

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Syncb/hhgreg	Last 4 digits of account number	8930	\$3,111.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 09/15 Last Active 11/19	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that annly	
Who incurred the debt? Check one.	As of the date you me, the dain't	3. Oncok all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Charge Acc	count	
Synchrony Bank/Care Credit	Last 4 digits of account number	3439	\$2,456.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 12/13 Last Active 11/13/19	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Vho incurred the debt? Check one.	,		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	
Synchrony Bank/Lowes	Last 4 digits of account number	7958	\$1,703.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 09/18 Last Active 11/19	
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	TEDOLLAS DITOLITY CIAIMS		
No	☐ Debts to pension or profit-sharing	n plane, and other similar dobts	

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Debtor Debtor	1 Jon C Miracle 2 Traci L Miracle		Case number (if known)						
4.3	Synchrony Bank/Old Navy	Last 4 digits of account number	6985	\$551.00					
<u>. </u>	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 05/18 Last Active 12/19						
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	☐ Debtor 1 only	☐ Contingent							
	■ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts						
	Yes	■ Other. Specify Credit Care							
4.3									
2	Ziegler Tire	Last 4 digits of account number	T161	\$4,251.84					
	Nonpriority Creditor's Name 4150 Millenium Blvd Massillon, OH 44646	When was the debt incurred?	9/19/19 and 9/28/19						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim							
	☐ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	■ Debtor 1 and Debtor 2 only		□ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:						
	☐ Check if this claim is for a community	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not							
	debt								
	Is the claim subject to offset?	report as priority claims							
	No	Debts to pension or profit-sharing plans, and other similar debts							
	Yes	Other. Specify Tires							
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed							
is tryii have i	is page only if you have others to be notified ng to collect from you for a debt you owe to s nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in at you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1 or 2, then list the collection agency itional creditors here. If you do not have add	here. Similarly, if you					
_	nd Address L Credit	On which entry in Part 1 or Part 2 did you Line 4.1 of (<i>Check one</i>):							
	S Monroe St FI 4	′	Part 1: Creditors with Priority Unsecured Clair Part 2: Creditors with Nonpriority Unsecured						
Sandy	, UT 84070	Last 4 digits of account number	Part 2: Creditors with Nonphority Onsecured	Ciaims					
Name a	nd Address	On which entry in Part 1 or Part 2 did you	ulist the original creditor?						
	Credit	· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Clain	ms					
	S Monroe St FI 4 , UT 84070		Part 2: Creditors with Nonpriority Unsecured	Claims					
Januy	, 01 04070	Last 4 digits of account number							
	nd Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?						
Capita	ıl One x 30281		Part 1: Creditors with Priority Unsecured Clair						
	x 30281 ake City, UT 84130		Part 2: Creditors with Nonpriority Unsecured	Claims					
		Last 4 digits of account number							
Name a	nd Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?						
Cbna			Part 1: Creditors with Priority Unsecured Clair	ms					

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Debtor 2 Traci L Miracle		Case number (if known)
Po Box 6217		
Sioux Falls, SD 57117		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Citibank/Best Buy Po Box 6497	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Sioux Falls, SD 57117		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Credit First National Association Pob 81315	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Cleveland, OH 44181		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Discover Financial Pob 15316	Line <u>4.9</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Wilmington, DE 19850		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Discover Financial Pob 15316	Line <u>4.10</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Wilmington, DE 19850		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
First Bankcard PO Box 2557	Line 4.15 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Omaha, NE 68103-2557		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
First National Bank P.o. Box 3412	Line 4.15 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Omaha, NE 68197		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
First National Bank P.o. Box 3412	Line 4.16 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Omaha, NE 68197		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Kohls/Capital One Po Box 3115	Line 4.20 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Milwaukee, WI 53201		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Navient Po Box 9500	Line 4.23 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
Wilkes Barre, PA 18773		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Shop Your Way Mastercard PO Box 9001104	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Louisville, KY 40290-1104		Part 2: Creditors with Nonpriority Unsecured Claims
· 	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did y	
Syncb/furniture Fair	Line 4.26 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
C/o Po Box 965036 Orlando, FL 32896		Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	

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	on C Miracle raci L Miracle		Case number (if known)
Name and Add Syncb/hhg C/o Po Bo Orlando, F	greg x 965036	On which entry in Part 1 or Part 2 of Line 4.27 of (Check one):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
,		Last 4 digits of account number	
Name and Add Syncb/hhg C/o Po Bo Orlando, F	greg x 965036	On which entry in Part 1 or Part 2 of Line 4.28 of (Check one):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number	
PO Box 96	/ Bank ruptcy Dept	On which entry in Part 1 or Part 2 of Line 4.30 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
		-	
Synchrony C/o Po Box Orlando, F	/ Bank/Care Credit x 965036	On which entry in Part 1 or Part 2 of Line 4.29 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Oriando, i	L 32030	Last 4 digits of account number	
PO Box 96	/ Bank/Home	On which entry in Part 1 or Part 2 of Line 4.28 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number	
Po Box 95	/ Bank/Lowes 6005	On which entry in Part 1 or Part 2 or Line 4.30 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Orlando, F	L 32896	Last 4 digits of account number	
Name and Address Synchrony Bank/Old Navy Po Box 965005 Orlando, FL 32896		On which entry in Part 1 or Part 2 of Line 4.31 of (Check one):	did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number	
Name and Address Visa PO Box 672051		On which entry in Part 1 or Part 2 of Line 4.17 of (Check one):	did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Dallas, IA	75267-2021	Last 4 digits of account number	
6. Total the ar	dd the Amounts for Each Type mounts of certain types of unsecur ecured claim.		stical reporting purposes only. 28 U.S.C. §159. Add the amounts for each
Total	6a. Domestic support obli	gations	Total Claim 6a. \$ 0.00

				l otal Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 24,407.43
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 24,407.43
				Total Claim
	6f.	Student loans	6f.	\$ 9,619.00
Total claims				,

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Debtor 1 Jo Debtor 2 Tr	n C Mir aci L Mi		Case nu	ımber (if knowi	n)
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	90,586.66
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	100,205.66

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First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO	Fill in this infor	mation to identify your	case:		
Debtor 2 Traci L Miracle (Spouse if, filing) First Name Middle Name Last Name	Debtor 1	Jon C Miracle			
(Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO		First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO	Debtor 2	Traci L Miracle			
	(Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO	
	_				
(if known)	(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Advantage Leasing Corp 13400 Bishop's Lane Brookfield, WI 54005	2000 Talbert Trailer VIN 40FE03639Y1019271
2.2	Advantage Leasing Corp 13400 Bishop's Lane Brookfield, WI 54005	2000 Talbert trailer VIN 40FE02933Y1019272
2.3	Advantage Leasing Corp 13400 Bishop's Lane Brookfield, WI 54005	1997 Peterbuilt 379 - Concentional 37
2.4	Burhill Leasing 116 N Jefferson Street Dayton, OH 45402	2016 Chevy Silverado
2.5	Donald Watkins	Lease with Purchase Option for 232 Overbrook Drive Monroe OH
2.6	Santander 8585 N Stemmons Fwy Suite 1100-N Dallas, TX 75247	2018 Jeep Wrangler - Son pays car loan

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		Documen	it Page 44 of	<i>1</i> 5		
Fill in this	information to identify your	case:				
Debtor 1	Jon C Miracle					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing	Traci L Miracle First Name	Middle Name	Last Name			
	-	SOUTHERN DISTRICT O				
United Stat	es Bankruptcy Court for the:	300THERN DISTRICT C	DF UNIO			
Case numb	er				☐ Check if this is an amended filing	
	Form 106H ule H: Your Cod	ebtors			12/1	5
people are fill it out, are your name	filing together, both are equ nd number the entries in the and case number (if known)	ally responsible for supply boxes on the left. Attach Answer every question.	ying correct informatio the Additional Page to	n. If more space is this page. On the to	rate as possible. If two married needed, copy the Additional Pa op of any Additional Pages, writ	
1. Do y	ou have any codebtors? (If	you are filing a joint case, do	o not list either spouse a	s a codebtor.		
□ No ■ Yes						
	nin the last 8 years, have you a, California, Idaho, Louisiana,				rty states and territories include)	
_	Go to line 3. Did your spouse, former spou	use, or legal equivalent live	with you at the time?			
in line Form 1	2 again as a codebtor only i	f that person is a guaranto	or or cosigner. Make su	ire you have listed	ng with you. List the person sho the creditor on Schedule D (Offi , Schedule E/F, or Schedule G t	icial
	Column 1: Your codebtor lame, Number, Street, City, State and Zl	IP Code		Column 2: The cr Check all schedu	reditor to whom you owe the de les that apply:	bt
2	on C Miracle II 32 Overbrook Drive Monroe, OH 45050 Son of Debtor			■ Schedule D, □ Schedule E/F □ Schedule G Santander Con	-, line	

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	in this information to identify your otor 1 Jon C Mira									
Del	otor 2 Traci L Mir									
	buse, if filing)	OOLITHEDN BIOTON	OT OF OUR							
	ted States Bankruptcy Court for th	ne: SOUTHERN DISTRIC	CT OF OHIO							
	se number nown)		_				c if this is: n amende	d filing		
,						l —		Ū	g postpetition	chapter
_									ollowing date:	
0	fficial Form 106l					M	M / DD/ Y	YYY		
S	chedule I: Your Ind	come								12/15
	t 1: Describe Employmen		ional pages, write yo	our name	e and	d case nu	·	·	Ing spouse	question
	information.								iiig spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				□ Emplo■ Not er	•		
	employers.	Occupation	Self employed	trucker						
	Include part-time, seasonal, or self-employed work.	Employer's name	J&M Trucking							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	there?				_			
Par	t 2: Give Details About Me	onthly Income								
spoo If yo	mate monthly income as of the use unless you are separated. u or your non-filing spouse have r	nore than one employer, c	,	•	Í	•			,	J
mor	e space, attach a separate sheet t	o this form.				For Deb	tor 1	For Del	btor 2 or	
									ng spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	7,	800.00	\$	0.00	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	7,80	0.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

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Debi		Jon C Miracle Traci L Miracle	-	Cas	e number (if known)		
				Fo	or Debtor 1		Debtor 2 or -filing spouse
	Cop	by line 4 here	4.	\$	7,800.00	\$	0.00
5.	List	all payroll deductions:					
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,872.00	\$	0.00
	5b.	Mandatory contributions for retirement plans	5b.		0.00	\$-	0.00
	5c.	Voluntary contributions for retirement plans	5c.		0.00	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	٠.	0.00	\$	0.00
	5e.	Insurance	5e.	\$	0.00	\$	0.00
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	5g.	Union dues	5g.	\$	0.00	\$	0.00
	5h.	Other deductions. Specify:	5h.	+ \$	0.00	+ \$	0.00
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,872.00	\$	0.00
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,928.00	\$	0.00
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b.	٠.	0.00	\$ 	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		· -		·	
		settlement, and property settlement.	8c.		0.00	\$	0.00
	8d.	Unemployment compensation	8d.		0.00	\$	0.00
	8e.	Social Security	8e.	\$	0.00	\$	0.00
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00
	8g.	Pension or retirement income	8g.		0.00	\$	0.00
	-3-	Employer's lease payment for use	_	٠.		· —	
	8h.	Other monthly income. Specify: of Trailer	8h.	+ \$	205.93	+ \$	0.00
		Employer's lease payment for use of trailer		\$	230.20	\$	0.00
		Rent from son	_	\$	600.00	\$	0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,036.13	\$	0.00
10	Cal	culate monthly income. Add line 7 + line 9.	10.		6,964.13 + \$		0.00 = \$ 6,964.13
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	—	0,904.13		0.00 = 0,964.13
11.	State Included the other Double	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe				Schedule J. 11. +\$ 0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The respective that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$ 6,964.13 Combined
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?				monthly income
		Yes. Explain: Debtors receive approx \$217 in food stamps.Stee					

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify y	our <u>case:</u>			1		
	otor 1	Jon C Mirac				Che	eck if this is:	
		Jon o minac					An amended filing	
'	otor 2 ouse, if filing)	Traci L Mira	cle					wing postpetition chapter the following date:
``	, G,		001171	IEDN DIOTDIOT OF OUR				
Unit	ted States Bank	ruptcy Court for the	: SOUTE	IERN DISTRICT OF OHIC)		MM / DD / YYYY	
	se number nown)							
0	fficial Fo	rm 106J						
		J: Your						12/15
info	ormation. If m		eded, atta	. If two married people a ch another sheet to this n.				
Par		ribe Your House	ehold					
1.	Is this a join							
	□ No. Go to		in a canar	ate household?				
	_		ш а ѕера	ate nousenoid?				
	■ N □ Y	-	st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Del	btor 2.	
2.		e dependents?	□ No	, ,				
	Do not list D Debtor 2.	•	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Child		15	Yes
								□ No
								☐ Yes ☐ No
								☐ No☐ Yes
								□ No
								☐ Yes
3.		penses include of people other t	han	No				
		d your depende		Yes				
Par	t 2: Estim	nate Your Ongoi	ng Month	ly Expenses				
exp	imate your ex penses as of a plicable date.	a date after the	our bankr bankrupto	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using this followed are used to be seen the control of the contro	orm as a s e <i>J</i> , check t	upplement in a Cha	apter 13 case to report of the form and fill in the
				government assistance				
	value of suc ficial Form 10		d have in	cluded it on Schedule I: \	Your Income		Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	900.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner'	s, or renter	's insurance		4b.		0.00
	4c. Home	maintenance, re	epair, and	upkeep expenses		4c.	\$	0.00
_		eowner's associa				4d.	·	0.00
5.	Additional i	mortgage paym	ents for y	our residence, such as ho	me equity loans	5.	\$	0.00

Deb	otor 1 Jon C Miracle			
Deb	otor 2 Traci L Miracle	Case num	nber (if known)	
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	250.00
	6b. Water, sewer, garbage collection	6b.	· -	100.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	·	315.00
	6d. Other. Specify:	6d.	· -	0.00
7.	Food and housekeeping supplies	— 7.	· -	500.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	\$	0.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.			
	Do not include car payments.	12.	·	216.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	· -	95.59
	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	15a.	c	0.00
	15b. Health insurance	15a. 15b.	·	0.00
	15c. Vehicle insurance	15b. 15c.		0.00 0.00
	15d. Other insurance. Specify: Dental	15d.	· -	<u> </u>
	License Insurance		\$	80.84 48.85
			\$ 	
	Life Insurance Truck and Trailer Insurance		\$ ———	325.00
16	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	198.15
10.	Specify: IRS	16.	\$	435.00
17	Installment or lease payments:		Ψ	433.00
17.	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify: Student loans (in deferrment until 2/20)	17c.		180.00
	17d. Other. Specify: 2020 Kaufman Trailer	17d.		230,20
	Second 2020 Kaufman Trailer		\$	205.93
	Braces (Traci) - Pd off in approx 22 mos		\$	197.00
	Braces (Makenna) - Pd off in 6 months		\$	178.00
	Burhill Leasing - 2016 Chevy work truck		\$	1,070.00
18.	Your payments of alimony, maintenance, and support that you did not report as		<u> </u>	1,010.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Ye	our Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
_	20e. Homeowner's association or condominium dues	20e.		0.00
21.	Other: Specify: Gas for transport business	21.	+\$	1,500.00
	Transport truck maintenance		+\$	100.00
	Computer supplies - ink		+\$	10.64
	Computer supplies - HP Service		+\$	14.99
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	7,201.19
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	7,201.19
	, , ,			1,201.13
23.	Calculate your monthly net income.		_	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	6,964.13
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	7,201.19
	One Outland was wealth and a second of			
	23c. Subtract your monthly expenses from your monthly income.	23c.	\$	-237.06
	The result is your monthly net income.	200.		

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	otor 1 otor 2	Jon C Mi Traci L M	···········
For e		xample, do yo	an increase or decrease in your expenses within the year after you file this form? ou expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a terms of your mortgage?
	■ No	0.	
	□ Ye	es.	Explain here: Son pays Chrysler lease payment for 2018 Jeep of 447.76/mo. \$217/mo received from foodstamps. Also receive Medicaid.

Fill in Abia is					
FIII IN THIS II	nformation to identify your	case:			
Debtor 1	Jon C Miracle				
D 1 / 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Traci L Miracle First Name	Middle Name	Last Name		
(Spouse II, IIIIII)) Filst Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case numbe	er				
(if known)				_	Check if this is an
					amended filing
You must file	e this form whenever you fi	ile bankruptcy schedules n connection with a bank	nsible for supplying correct s or amended schedules. Ma cruptcy case can result in fin	king a false statement, con	
	Sign Below				
Did yo	u pay or agree to pay some	one who is NOT an attor	ney to help you fill out bank	ruptcy forms?	
■ No	0				
ΠΥ	es. Name of person			Attach Bankruptcy Peti	ition Preparer's Notice
· ·					nture (Official Form 119)
	penalty of perjury, I declare by are true and correct.	that I have read the sum	mary and schedules filed wi	th this declaration and	
Y Isl	Jon C Miracle		X /s/ Traci L Mira	acla	
	n C Miracle		Traci L Miracle		
	nature of Debtor 1		Signature of Deb		
Dat	te February 5, 2020		Date Februar	ry 5, 2020	

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Fill	in this inforr	nation to identify you	case:			
	otor 1	Jon C Miracle				
		First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	Traci L Miracle First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT C	OF OHIO		
	se number					theck if this is an mended filing
Sta		of Financial		duals Filing for B		4/19
nfo	rmation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Par	t 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	■ Married□ Not mai					
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	_	,				
	■ No □ Yes. Lis	at all of the places you li	ved in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory ico, Texas, Washington and W	
	■ No					
	_	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income you	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fil	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$7,457.00	■ Wages, commissions, bonuses, tips	\$0.00
			Operating a business		☐ Operating a business	

Official Form 107

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	C Miracle		Cas	e number (if known)	
		Deliterat		D-1:10	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	
For last calend (January 1 to D	lar year: December 31, 201	☐ Wages, commissions, bonuses, tips	\$139,157.00	■ Wages, commiss bonuses, tips	\$23,803.00
		Operating a business		☐ Operating a busing	ness
	ar year before tha December 31, 201		\$109,506.00	■ Wages, commiss bonuses, tips	ions, \$765.00
		☐ Operating a business		☐ Operating a busing	ness
winnings. İf List each so	you are filing a join	ents; pensions; rental income; inte nt case and you have income that s income from each source separa	you received together, list it o	only once under Debtor	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calend (January 1 to D	lar year: December 31, 201	Mutual Funds - used for gas and business expenses and attorney fees	\$4,300.00		
6. Are either No.	Debtor 1's or Deb Neither Debtor 1 individual primarily During the 90 days	s You Made Before You Filed for otor 2's debts primarily consume nor Debtor 2 has primarily cons of for a personal, family, or househous s before you filed for bankruptcy, d	er debts? umer debts. Consumer debt old purpose."		.C. § 101(8) as "incurred by an
	Yes List be paid the not income.	line 7. Blow each creditor to whom you path treditor. Do not include payme clude payments to an attorney for street on 4/01/22 and every 3 yea	nts for domestic support oblig this bankruptcy case.	gations, such as child so	upport and alimony. Also, do
		or 2 or both have primarily cons s before you filed for bankruptcy, d		I of \$600 or more?	
	includ	line 7. elow each creditor to whom you pa le payments for domestic support of ey for this bankruptcy case.			
Creditor's	Name and Addre	Dates of payme	ent Total amount	Amount you Wa	as this payment for

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Debto	or 2	Traci L Miracle		Cas	se number (if known)		
li o a	nside of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which yog g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	I	No					
] \	Yes. List all payments to an insider.					
1	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
iı	nside	n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		nents or transfer a	any property on a	ccount of a d	ebt that benefited an
	.	No					
	J \	Yes. List all payments to an insider					
I	Insid	der's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
				paid	Still Owe	molude cred	iitoi s riame
Part 4	4:	Identify Legal Actions, Repossession	is, and Foreclosures				
L	ist a	n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.					
	_	No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
		n 1 year before you filed for bankrupto k all that apply and fill in the details belov		rty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
•	_	No. Go to line 11. Yes. Fill in the information below.					
		litor Name and Address	Describe the Property		Date		Value of the
	0100	mor Name and Address	Explain what happened		Date		property
11. V	Vithi	n 90 days before you filed for bankrup			nancial institutior	, set off any a	mounts from your
a	CCO	unts or refuse to make a payment bec	ause you owed a debt?				
	_	No					
L		Yes. Fill in the details.					
1	Cred	litor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		rty in the possess	ion of an assigne	e for the bene	efit of creditors, a
	_	No Yes					
Part :	5:	List Certain Gifts and Contributions					
13. V		n 2 years before you filed for bankrup	tcy, did you give any gifts	with a total value	of more than \$60	0 per person	?
-	_	Yes. Fill in the details for each gift.					
	Gifts	s with a total value of more than \$600 person	Describe the gifts		Dates the g	s you gave ifts	Value
		on to Whom You Gave the Gift and ress:					

Case 1:20-bk-10369 Doc 1 Filed 02/10/20 Entered 02/10/20 15:00:19 Desc Main Page 54 of 75 Document Jon C Miracle Debtor 1 Debtor 2 Traci L Miracle Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? П Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. 2016 Hellcat Chrysler Charger December \$40.580.00 Wright Patt Credit Union has been paid in full stolen December 2019. Vehicle by insurance company. 2019 tracked to Atlanta GA. No recovery by police to date. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. П No Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Law Offices of Christine B Hill Ltd **Attorney Fees** 2/3/20 \$900.00 3991 Hamilton Middletown Road Suite T Hamilton, OH 45011 chrishill.atty@fuse.net 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred **Address** or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Person's relationship to you

Official Form 107

page 4

paid in exchange

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Debtor 1 Jon C Miracle
Debtor 2 Traci L Miracle

Case number (if known)

None Bubba Trailer sold December 2019 for approx \$42,000. Lien of \$3.4,140 paid off to Auto Acceptance Now (aka Glockner Finance)		Person Who Received Transfer Address	Description and val property transferred		payme	ne any property or nts received or debts exchange	Date transfer was made			
Bubba Trailer sold received in transaction. December 2019 for approx \$42,000. Lien of \$34,140 paid off to Auto Acceptance Now (aka Glockner Finance)		Person's relationship to you								
beneficiary? (These are often called asset-protection devices.) Nome of trust Description and value of the property transferred Date Transfer w made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closer sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone. No Yes. Fill in the details. Where is the property? Nomer's Name Where is the property? Nouner's Name Where is the property? Nouner's Name Where is the property? Nouner's Name No Where is the property? Nouner's Name		. , .	Bubba Trailer sol December 2019 fo \$42,000. Lien of \$34,140 pa Auto Acceptance	d or approx aid off to Now (aka			December 2019			
Name of trust Description and value of the property transferred made Part 83: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerag houses, pension funds, cooperatives, associations, and other financial institutions. Nome of Financial Institution and Address (Number, Street, City, State and ZIP Code) No you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. No Yes. Fill in the details. No Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. No Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. No Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. No Who else has or had		beneficiary? (These are often called asset-protection devices.) No								
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokeragh houses, pension funds, cooperatives, associations, and other financial institutions. No										
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerag houses, pension funds, cooperatives, associations, and other financial institutions. Nome of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred trans closed, sold, word, or transferred transferred transferred. Last 4 digits of account or instrument closed, sold, moved, or transferred transferred transferred. Last balan before closing trans transferred transferred transferred. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No		Name of trust	Description and val	ue of the prop	erty transf	erred	Date Transfer was made			
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerag houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred Type of account or instrument closed, sold, moved, or transferred Type of account or instrument closed, sold, moved, or transferred No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Part 3: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone. No Yes. Fill in the details. No Yes. Fill in the details. Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code)	Part	8: List of Certain Financial Accounts, Instru	uments, Safe Deposit B	Boxes, and Sto	rage Units					
Address (Number, Street, City, State and ZIP 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No		sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit houses, pension funds, cooperatives, associations, and other financial institutions. No								
ash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Val		Address (Number, Street, City, State and ZIP		• •		closed, sold, moved, or	Last balance before closing or transfer			
☐ Yes. Fill in the details. Name of Financial Institution Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ■ No Yes. Fill in the details. Name of Storage Facility Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you beld or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone. ■ No Yes. Fill in the details. Owner's Name Where is the property? (Number, Street, City, State and ZIP Code)	21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Val		_								
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☐ Yes. Fill in the details. Name of Storage Facility Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trustor someone. No ☐ Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Describe the property Val	22.	Have you stored property in a storage unit or p	place other than your h	ome within 1 y	ear before	you filed for bankruptcy	/?			
Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trus for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP										
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. ■ No □ Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP		·	to it? Address (Number, Stre		Describe t	he contents				
for someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP	Part	9: Identify Property You Hold or Control for	Someone Else							
☐ Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Describe the property Val			one else owns? Includ	le any property	you borro	owed from, are storing fo	or, or hold in trust			
Address (Number, Street, City, State and ZIP Code) (Number, Street, City, State and ZIP		_								
			(Number, Street, City, State and ZIP		Describe the property		Value			

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Debtor 1 Jon C Miracle
Debtor 2 Traci L Miracle

Case number (if known)

in the live of the details about Littlicities and into ination	Part 10:	Give Details About Environmental Information
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For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous o toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	aw, whether you now own, operate, o	r utilize it or use			
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ntal law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adminis	trative proceeding under any envi	ronmental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pa	t 11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	lid you own a business or have an	y of the following connections to any	business?			
	■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						

-	 in 4 years before you mea for banking toy, and you own a business of have any of the following connections to any business.
	■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
	☐ A partner in a partnership
	☐ An officer, director, or managing executive of a corporation
	☐ An owner of at least 5% of the voting or equity securities of a corporation
	No. None of the above applies. Go to Part 12.
	Yes. Check all that apply above and fill in the details below for each business.

Yes. Check all that apply above and fill in the details below for each business.

Business Name
Address
(Number, Street, City, State and ZIP Code)

Debtor is an independent operator

Describe the nature of the business
Name of accountant or bookkeeper

Employer Identification number
Do not include Social Security number or ITIN.

Dates business existed

EIN: 47-3609814

From-To From2008 to date

trucking/freight business

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Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

In	Jon C Miracle		Case No.					
111	re Traci L Miracle	Debtor(s)	Chapter	7				
			-					
	DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR DE	EBTOR(S)				
l.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered	or to			
	For legal services, I have agreed to accept		s	900.00				
	Prior to the filing of this statement I have received	d	\$	900.00				
	Balance Due		_	0.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
1.	■ I have not agreed to share the above-disclosed con	npensation with any other person	unless they are mem	bers and associates of my la	w firm.			
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the name of the agreement.				n. A			
5.	In return for the above-disclosed fee, I have agreed to	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and ren b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicate 	atement of affairs and plan which itors and confirmation hearing, a reduce to market value; ex ions as needed; preparation	h may be required; nd any adjourned hea emption planning;	rings thereof;	of			
б.	522(f)(2)(A) for avoidance of liens on h By agreement with the debtor(s), the above-disclosed a Representation of the debtors in any of any other adversary proceeding.	fee does not include the following		es, relief from stay actio	ons or			
		CERTIFICATION						
this	I certify that the foregoing is a complete statement of a s bankruptcy proceeding.	any agreement or arrangement fo	r payment to me for re	epresentation of the debtor(s	s) in			
	February 5, 2020	/s/ Christine Bog	ıhosian Hill, Esq.					
_	Date	Christine Bogho	sian Hill, Esq. 004	1319				
		Signature of Attorn	ey hristine B Hill Ltd					
		3991 Hamiltonn	Middletown Road					
		Suite T	044					
		Hamilton, OH 45 513 381-8999 Fa						
		chrishill.atty@fu						
		Name of law firm						

Fill in th	is information to identify your case:			irected in this form and	in Form
Debtor	Jon C Miracle	122	2A-1Supp:		
Debtor 2			1. There is no presu	umption of abuse	
	•	OL:	☐ 2. The calculation to	o determine if a presun	nption of abuse
United	States Bankruptcy Court for the: Southern District of	Onio		nade under <i>Chapter 7 I</i>	Means Test
Case nu	umber			cial Form 122A-2).	
(if known)				does not apply now be service but it could ap	
]	☐ Check if this is a	n amended filing	
Offic	<u>ial Form 122A - 1</u>				
Char	oter 7 Statement of Your Curr	ent Monthly Inc	ome		12/19
attach a s case nun	mplete and accurate as possible. If two married people are separate sheet to this form. Include the line number to whother (if known). If you believe that you are exempted from g military service, complete and file Statement of Exemption Calculate Your Current Monthly Income	ich the additional information a a presumption of abuse because	pplies. On the top of an se you do not have prin	ny additional pages, writ narily consumer debts o	e your name and r because of
1. W I	hat is your marital and filing status? Check one only	<i>'</i> .			
	Not married. Fill out Column A, lines 2-11.				
	Married and your spouse is filing with you. Fill out	both Columns A and B, lines	2-11.		
	Married and your spouse is NOT filing with you. Y	ou and your spouse are:			
	\square Living in the same household and are not legall	y separated. Fill out both Col	umns A and B, lines 2	<u>?</u> -11.	
	☐ Living separately or are legally separated. Fill out penalty of perjury that you and your spouse are leg living apart for reasons that do not include evading	gally separated under nonban	kruptcy law that applie	es or that you and your	
101(1 the 6	the average monthly income that you received from all st 0A). For example, if you are filing on September 15, the 6-months, add the income for all 6 months and divide the total bits own the same rental property, put the income from that pro-	onth period would be March 1 through 6. Fill in the result. Do not include	igh August 31. If the amo le any income amount mo	ount of your monthly incomore than once. For examp	ne varied during le, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, any yroll deductions).	nd commissions (before all	\$	\$	
Co	i mony and maintenance payments. Do not include p olumn B is filled in.	, ,	\$	\$	
of fro an	I amounts from any source which are regularly paid you or your dependents, including child support. I m an unmarried partner, members of your household, d roommates. Include regular contributions from a spo ed in. Do not include payments you listed on line 3.	nclude regular contributions your dependents, parents,	\$	\$	
5. Ne	t income from operating a business, profession, o				
		Debtor 1			
	oss receipts (before all deductions)	\$			
İ	dinary and necessary operating expenses	-\$	φ	¢	
	et monthly income from a business, profession, or farm	\$ Copy here ->	a	>	
6. Ne	et income from rental and other real property	Debtor 1			
	and require (hefere all dedications)	\$			
	oss receipts (before all deductions)	<u>-\$</u>			
	dinary and necessary operating expenses	\$ Copy here ->	\$	\$	
	et monthly income from rental or other real property	Ψ	\$	\$	
7. Int	erest, dividends, and royalties		Ψ	·	

Official Form 122A-1

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Debto Debto			L Miracle				Case number (ii	f known)		
							Column A Debtor 1		Column B Debtor 2 or non-filing s	
8.	Unem	ployn	ment compensation				\$		\$	
	the So	ocial S	er the amount if you contend that the amou Security Act. Instead, list it here:							
	For	vour	spouse	• \$						
9.	Pensi benefi not ind United disabi pay pa does i	ion or it unde clude a d State lity, or aid un not ex	retirement income. Do not include any a er the Social Security Act. Also, except as any compensation, pension, pay, annuity, es Government in connection with a disab r death of a member of the uniformed servader chapter 61 of title 10, then include that acceed the amount of retired pay to which y	amount received the stated in the next of allowance paid illity, combat-related rices. If you receive the pay only to the expounded otherwise	at wasented by the displayment of the displayment o	as a ence, do ne ury or ny retired that it	\$		\$	
10.	Incom Do no receiv domes United disabi	ne from t inclured as stic tend d State lity, or	der any provision of title 10 other than charm all other sources not listed above. So de any benefits received under the Social a victim of a war crime, a crime against harrorism; or compensation, pension, pay, are sovernment in connection with a disabor death of a member of the uniformed serval separate page and put the total below.	pecify the source a I Security Act; payr umanity, or interna nnuity, or allowanc ility, combat-related	nd a nent tiona e pa d inju	s al or iid by the ury or	Ψ		Φ	
		٠					\$		\$	
		_					\$		\$	
		To	tal amounts from separate pages, if any.			+	\$		\$	
11.			our total current monthly income. Add n. Then add the total for Column A to the			\$		+ \$		= \$
Part	2:	Dete	ermine Whether the Means Test Applies	s to You						income
12.	Calcu	ılate v	your current monthly income for the year	ar. Follow these ste	ens:					
			your total current monthly income from line				Сору І	ine 11 he	ere=>	\$
	N	Multipl	y by 12 (the number of months in a year)							x 12
	12b. T	The re	sult is your annual income for this part of	the form					12b.	\$
13.	Calcu	ılate ti	he median family income that applies t	o you. Follow these	e ste	eps:				
	Fill in	the sta	ate in which you live.							
	Fill in	the nu	umber of people in your household.							
	To fine	d a list	edian family income for your state and siz t of applicable median income amounts, ç n. This list may also be available at the ba	o online using the		specified	in the separate	instructi	13. ons	\$
14.	How o	do the	e lines compare?							
	14a.		Line 12b is less than or equal to line 13. Go to Part 3. Do NOT fill out or file Offici	al Form 122A-2.						
	14b.		Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A–2.	o of page 1, check t	box 2	2, The pro	esumption of a	buse is d	etermined by	Form 122A-2.
Part			Below							
	E	By sigr	ning here, I declare under penalty of perju	ry that the informat	ion c	on this sta	atement and in	any atta	chments is tru	ue and correct.
	X	/s/ .	Jon C Miracle		X	/s/ Trac	i L Miracle			
			n C Miracle nature of Debtor 1				Miracle e of Debtor 2			
	Date	•	pruary 5, 2020	D		Ū	ry 5, 2020			
	Date	гер	Ji uai y 3, 2020	Di	aie _	reprua	ı y ə, 2020			

Official Form 122A-1

Jon C Miracle

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Debtor 1 Debtor 2	Jon C Miracle Traci L Miracle	Case number (if known)	
	MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2.	MM/DD/YYYY	
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Fill in this inform	nation to identify your c	case:		
Debtor 1	on C Miracle			
Debtor 2 T (Spouse, if filing)	raci L Miracle			
United States Bar	nkruptcy Court for the: S	Southern District of Ohio		
Case number	_			Check if this is an amended filing
(if known)				Ç
Statement	<u> </u>	n from Presumption of		e Under § 707(b)(2) 12/19 Official Form 122A-1), if you believe that you are
exempted from a exclusions in this	presumption of abuse. I	Be as complete and accurate as possib	ole. If two	narried people are filing together, and any of the a separate Form 122A-1 If you believe that this is
Part 1 Identi	ify the Kind of Debts Yo	u Have		
personal, far		e." Make sure that your answer is consiste		101(8) as "incurred by an individual primarily for a answer you gave at line 16 of the Voluntary Petition for
	to Form 122A-1; on the to plement with the signed F		ere is no pi	resumption of abuse, and sign Part 3. Then submit this
☐ Yes. Go				
		Service Provisions Apply to You		
		ned in 38 U.S.C. § 3741(1))?		
□ No. Go		hile you were on active duty or while you w	were perfo	ming a homeland defense activity?
	J.S.C. § 101(d)(1); 32 U.S		were perior	ming a nomeland deterise activity:
☐ No.	Go to line 3.			
☐ Yes.		n the top of page 1 of that form, check box t with the signed Form 122A-1.	(1, There i	s no presumption of abuse, and sign Part 3. Then
3. Are you or h	nave you been a Reservi	ist or member of the National Guard?		
□ No. Co	omplete Form 122A-1. Do	not submit this supplement.		
☐ Yes. We	ere you called to active du	uty or did you perform a homeland defense	e activity?	10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
☐ No.	Complete Form 122A-1	Do not submit this supplement.		
☐ Yes.	Check any one of the fo	following categories that applies:		
	I was called to active 90 days and remain on	duty after September 11, 2001, for at lead active duty.	ast 122	ou checked one of the categories to the left, go to Form A-1. On the top of page 1 of Form 122A-1, check box 3, a Means Test does not apply now, and sign Part 3. Then
	90 days and was releas	duty after September 11, 2001, for at leased from active duty on0 days before I file this bankruptcy case.	ast are dur	mit this supplement with the signed Form 122A-1. You not required to fill out the rest of Official Form 122A-1 ing the exclusion period. The exclusion period means time you are on active duty or are performing a
	I am performing a hor	meland defense activity for at least 90 d	days hor	neland defense activity, and for 540 days afterward. 11 .C. § 707(b)(2)(D)(ii).
		and defense activity for at least 90 days, , which is fewer than 540 days before	s, ore I If y	our exclusion period ends before your case is closed, may have to file an amended form later.

file this bankruptcy case.

Fill in this information to identify your case:	Check one box only as directed in this form and in Form				
Debtor 1 Jon C Miracle	122A-1Supp:				
Debtor 2 (Spouse, if filing) Traci L Miracle	■ 1. There is no presumption of a	ıbuse			
United States Bankruptcy Court for the: Southern District of Ohio Case number	☐ 2. The calculation to determine applies will be made under 0 Calculation (Official Form 12	Chapter 7 Means Test			
(if known)	☐ 3. The Means Test does not ap qualified military service but				
	☐ Check if this is an amended	d filing			
Official Form 122A - 1					
Chapter 7 Statement of Your Current Monthly	[,] Income	12/19			
case number (if known). If you believe that you are exempted from a presumption of abuse qualifying military service, complete and file Statement of Exemption from Presumption of Part 1: Calculate Your Current Monthly Income					
1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A. lines 2-11.					
Married and your spouse is filing with you. Fill out both Columns A and B	3 lines 2-11				
☐ Married and your spouse is NOT filing with you. You and your spouse a					
☐ Living in the same household and are not legally separated. Fill out be					
☐ Living separately or are legally separated. Fill out Column A, lines 2-11 penalty of perjury that you and your spouse are legally separated under n living apart for reasons that do not include evading the Means Test require	nonbankruptcy law that applies or that you				
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.					
	Column A Column B Debtor 1 Debtor 2 onon-filing	or			
 Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions). 	ore all \$ 0.00 \$1	,711.16			

payroll deductions).	and cc	mmissi	ons (belo	\$	0.00	\$	1,711.16
Alimony and maintenance payments. Do not include Column B is filled in.	payme	ents from	a spouse	if \$	0.00	\$	0.00
of you or your dependents, including child support from an unmarried partner, members of your household	. Includ d, your	le regulaı depende	r contribut nts, parer	ions nts,	0.00	\$	0.00
Net income from operating a business, profession,	or farn	n					
		Deb	otor 1				
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from a business, profession, or far	m \$	0.00	Copy he	ere -> \$	0.00	\$	0.00
Net income from rental and other real property							
		Deb	otor 1				
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from rental or other real property	\$	0.00	Copy he	ere -> \$	0.00	\$	0.00
Interest, dividends, and royalties	-		•	\$	0.00	\$	0.00
	payroll deductions). Alimony and maintenance payments. Do not include Column B is filled in. All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3. Net income from operating a business, profession, Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or fait income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property	payroll deductions). Alimony and maintenance payments. Do not include paymed Column B is filled in. All amounts from any source which are regularly paid for of you or your dependents, including child support. Include from an unmarried partner, members of your household, your and roommates. Include regular contributions from a spouse of filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Gross receipts (before all deductions) \$ Cordinary and necessary operating expenses Net income from rental and other real property \$ Cordinary and necessary operating expenses S S S Net monthly income from rental or other real property \$ Cordinary and necessary operating expenses S S S S S S S S S S S S S	payroll deductions). Alimony and maintenance payments. Do not include payments from Column B is filled in. All amounts from any source which are regularly paid for househoof you or your dependents, including child support. Include regular from an unmarried partner, members of your household, your dependent and roommates. Include regular contributions from a spouse only if Coffilled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Oetinary and necessary operating expenses Net monthly income from rental or other real property Net monthly income from rental or other real property Security in the sum of the payments of the pay	Alimony and maintenance payments. Do not include payments from a spouse Column B is filled in. All amounts from any source which are regularly paid for household exper of you or your dependents, including child support. Include regular contribut from an unmarried partner, members of your household, your dependents, parer and roommates. Include regular contributions from a spouse only if Column B is filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from rental or other real property Net monthly income from rental or other real property Solution Ocopy here -> \$ Net monthly income from rental or other real property Ocopy here -> \$ Net monthly income from rental or other real property Ocopy here -> \$	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm Debtor 1

Official Form 122A-1

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Debto Debto				Case number	r (if known)			
				Column A Debtor 1		Column B Debtor 2 or non-filing sp	oouse	
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:		it under					
	For you \$	0.0	00					
	For your spouse \$	0.0	00					
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as st not include any compensation, pension, pay, annuity, o United States Government in connection with a disabilit disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that process does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapt	tated in the next senter r allowance paid by the ry, combat-related injur- es. If you received any pay only to the extent to r would otherwise be e	nce, do e ry or retired hat it	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, anr United States Government in connection with a disabilit disability, or death of a member of the uniformed service sources on a separate page and put the total below.	Security Act; payments manity, or international nuity, or allowance paid y, combat-related injur	or d by the y or	\$s	0.00	\$	0.00 0.00	
	Total amounts from separate pages, if any.			\$	0.00	\$	0.00	
	rotal amounts from sopulate pages, it arry.			<u> </u>			0.00	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column		\$	0.00	+ \$	1,711.16	Total current mor	
Part	2: Determine Whether the Means Test Applies to	o You						
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		Сор	y line 11 l	nere=>	\$1,711. ⁻	<u>16</u>
	Multiply by 12 (the number of months in a year)						x 12	
	12b. The result is your annual income for this part of the	e form				12b.	\$ 20,533.9	32
13.	Calculate the median family income that applies to	you. Follow these step	s:					
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	3					70.000	
	Fill in the median family income for your state and size. To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp		in the separa		13. tions	\$76,260.0	
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O		eck box	1, There is i	no presum	ption of abuse		
	Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of		The pre	esumption of	abuse is	determined by	Form 122A-2.	
Part	Go to Part 3 and fill out Form 122A–2. Sign Below							
тап	By signing here, I declare under penalty of perjury	that the information or	this sta	tement and	in anv atta	achments is tru	e and correct	
					-	.c.monio io ilu	S and contoot.	
	X /s/ Jon C Miracle Jon C Miracle			i L Miracle Miracle				
	Signature of Debtor 1			e of Debtor 2				

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Debtor 1 Debtor 2	Jon C Miracle Traci L Miracle		Case number (if known)	
Da	Tebruary 5, 2020 MM / DD / YYYY	Date	February 5, 2020 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2	2.		
	If you checked line 14b, fill out Form 122A-2 and file it with	n this form.		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Acima Credit 9815 Monroe Street 4th Floor Sandy, UT 84070

Acima Credit 9815 S Monroe St Fl 4 Sandy, UT 84070

Advantage Dept 59475 Milwaukee, WI 53259-0475

Advantage Leasing Corp 13400 Bishop's Lane #280 Brookfield, WI 53005

Advantage Leasing Corp 13400 Bishop's Lane, #280 Brookfield, WI 54005

Advantage Leasing Corp 13400 Bishop's Lane Brookfield, WI 54005

Auto Now Acceptance Co. 4746 Old Scioto Trail Portsmouth, OH 45662

Burhill Leasing 116 N Jefferson Street Dayton, OH 45402

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Po Box 30281 Salt Lake City, UT 84130

Capital One/walmart PO Box 4069 Carol Stream, IL 60197-4069

Cbna
Attn: Centralized Bankruptcy
Po Box 790034
St Louis, MO 63179

Cbna Po Box 6217 Sioux Falls, SD 57117 Chrysler Capital PO Box 660647 Dallas, TX 75266-0647

Citibank/Best Buy Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179

Citibank/Best Buy Po Box 6497 Sioux Falls, SD 57117

Credit First National Association Attn: Bankruptcy Po Box 81315 Cleveland, OH 44181

Credit First National Association Pob 81315 Cleveland, OH 44181

Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850

Discover Financial Pob 15316 Wilmington, DE 19850

Drs Cassinelli & Shanker 7242 Tylers Corner Drive Suite A West Chester, OH 45069

Emergency Medicine Specialists PO Box 145406 Cincinnati, OH 45250-5406

Erie Twp (Erie PD) PO Box 504 Greensburg, IN 47240

First Bankcard PO Box 2557 Omaha, NE 68103-2557

First National Bank Attn: Bankruptcy 1620 Dodge St Mailstop 4440 Omaha, NE 68197 First National Bank P.o. Box 3412 Omaha, NE 68197

Freedom Road Financial Attn: Bankruptcy Po Box 4597 Oak Brook, IL 60522

Freedom Road Financial 10605 Double R Blvd Reno, NV 89521

G.e. Federal Credit 10485 Reading Rd Cincinnati, OH 45241

General Electric CU Attn: Bankruptcy 10485 Reading Road Cincinnati, OH 45241

General Electric CU 10485 Reading Rd Cincinnati, OH 45241

Internal Revenue Service Insolvency Goup 6 1240 East Ninth Street, Room 493 Cleveland, OH 44199

Jon C Miracle II 232 Overbrook Drive Monroe, OH 45050

JP Graham Transport Inc 420 Constitution Blvd New Brighton, PA 15066

Kettering Health Network PO Box 933310 Cleveland, OH 44193

Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201

Kohls/Capital One Po Box 3115 Milwaukee, WI 53201

Memorial Hospital PO Box 931316 Cleveland, OH 44193-1316 Monroe Urgent Care 262 North Main Street Monroe, OH 45050-1236

Navient Attn: Bankruptcy Po Box 9640 Wilkes-Barre, PA 18773

Navient Po Box 9500 Wilkes Barre, PA 18773

Republic Bank & Trust Co PO Box 6877 Carol Stream, IL 60197-6877

Republic Bank & Truste Co PO Box 6877 Carol Stream, IL 60197-6877

Santander 8585 N Stemmons Fwy Suite 1100-N Dallas, TX 75247

Santander Consumer USA Attn: Bankruptcy 10-64-38-Fd7 601 Penn St Reading, PA 19601

Santander Consumer USA Po Box 961212 Fort Worth, TX 76161

Shop Your Way Mastercard PO Box 9001104 Louisville, KY 40290-1104

Syncb/furniture Fair Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Syncb/furniture Fair C/o Po Box 965036 Orlando, FL 32896

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 Syncb/hhgreg C/o Po Box 965036 Orlando, FL 32896

Synchrony Bank Attn Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060

Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Care Credit C/o Po Box 965036 Orlando, FL 32896

Synchrony Bank/Home PO Box 960061 Orlando, FL 32896-0061

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Po Box 956005 Orlando, FL 32896

Synchrony Bank/Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Old Navy Po Box 965005 Orlando, FL 32896

Visa PO Box 672051 Dallas, TX 75267-2021

Wright Patt Credit Union Attn: Bankruptcy 3560 Pentagon Blvd. Beavercreek, OH 45431

Wright Patt Credit Union 3560 Pentagon Blvd Beavercreek, OH 45431

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Wright Patt Credit Union PO Box 886 Wilmington, OH 45177

Ziegler Tire 4150 Millenium Blvd Massillon, OH 44646